

# TRAINING OFFICER MANUAL



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UTAH DEPARTMENT OF HEALTH  
DIVISION OF HEALTH SYSTEMS IMPROVEMENT  
BUREAU OF EMERGENCY MEDICAL SERVICES

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## INTRODUCTION

This handbook has been developed for Training Officers of agencies and organizations having State certified EMS personnel. The purpose of the handbook is to provide the Training Officers with information and guidelines, which will enable them to maintain agency CME records, submit recertification materials and administer the recertification practical examination.

Changes will occur periodically and will be available through the Bureau of Emergency Medical Services (Bureau) Standards and Evaluations staff or at the Instructor/Training Officer Seminars. It will be the responsibility of the Training Officer to become familiar with the material enclosed and to ensure that the most current information is obtained from the BUREAU. Policies and procedures should be reviewed regularly to ensure that current standards are being met. Notification of changes in the material may appear in the Bureau website. Additional handbooks are available from the Bureau for cost.

## GENERAL INFORMATION

A Training Officer must be designated by each emergency medical service agency. The agency director and Training Officer must sign an official Bureau Letter of Commitment, and the agency must send a Letter of Designation, to the Bureau identifying the new Training Officer. A new Letter of Commitment and Letter of Designation must be provided to the Bureau with any change of the Training Officer. Training officers must be certified EMT Instructors and they must successfully complete the BUREAU sponsored new Training Officer course. It is the responsibility of each organization and Training Officer to notify the BUREAU of any changes in Training Officer status.

## TRAINING OFFICER RESPONSIBILITIES:

### **CPR REQUIREMENT**

The Bureau no longer requires that EMTs are limited to take American Heart Association's, American Red Cross, or National Safety Council CPR courses, but can use any Bureau approved CPR course. The agency CPR course must have Bureau approval prior to providing the course to their personnel. All EMTs must be current and have completed one course every two years

### **CME TRAINING**

The Training Officer is responsible for developing and directing all CME training within their organization.:

1. The Training Officer is responsible to provide a training program for the agency in which:

All certification requirements must be met within the four-year period,.

- b. The CME requirements as described in the rule are met (see **Appendix D: Recertification Protocol** for the CME requirements listed by certification level).
- c. Ensure that all CME hour requirements herein are met **within** the four-year recertification period.

2. The Training Officer must ensure compliance to Bureau policies and Teaching and Testing Guidelines (TTG's) and the objectives herein, during all CME training sessions.
3. The Training Officer must ensure persons conducting CME training are knowledgeable and qualified in the subjects they teach. It is not necessary for individuals who teach CME training sessions to be certified EMT Instructors, but must be qualified in the subjects taught. The CME program should be organized around the training and responsibilities of the EMT.
4. The Training Officer is responsible to see that the intent of Continuing Medical Education (CME) is fulfilled. These are to:
  - a. Develop the EMT's understanding of clinical and operational roles and responsibilities.
  - b. Develop skills in patient assessment and in all treatment procedures within the scope of the EMT.
  - c. Develop skill in the use and maintenance of all equipment required to render emergency medical care at the level of certification.
  - d. Provide opportunities for discussion, skill, practice, and critique of skill performance
  - e. Develop EMT skills that are not used on a regular basis.
  - f. The CME credit hour is based upon one hour of participation.

There are specific methods in which the CME requirements may be met:

**1. Group training:**

- a. Workshops and seminars related to the required skills of an EMT and approved for CME credit by the Bureau or the Continuing Education Coordinating Board for EMS (CECBEMS).
- b. Local medical training meetings.
- c. Medical training meetings where a guest speaker presents material related to emergency medical care.
- d. Demonstration or practice sessions.
- e. Community emergency exercise and disaster drills. CME hours will only be provided for the time actually involved in the exercise (i.e. If exercise lasts for eight hours and you are only involved for four hours, you will only be allowed four hours. No more than 10 hours will be allowed during recertification period).
- f. Audiovisuals (films, videotapes) that illustrate and review proper emergency care procedures [must be viewed in presence of training officer (no more than 10 hours)].
- g. Specific college courses may be utilized only with the approval of the Bureau (no more than 10 hours). Classes such as biology, chemistry, anatomy and physiology don't require the Bureau's approval, but all other classes require Bureau approval.
- h. CPR training (no more than 16 hours in CPR in the four year period).

**2. Teaching classes:**

- a. Teaching general public (schools, scouts, clubs, or church groups) any topic within the scope of the Basic EMT.
- b. Teaching or coordinating EMS courses approved by the Bureau or teaching local EMS CME classes. (No more than 15 hours of CME will be credited for teaching classes during any certification period.)

**3. Use of Audio-Visuals:**

Audio-visuals (films, videotapes, etc) which illustrate and review proper emergency care procedures can be used, but no more than 10 hours of CME can be obtained using this method.

**4. Computer use:**

Utilizing computers, internet, software, or the like, which illustrate, practice, provide interactive use, or demonstrate proper emergency care procedures can be used, but no more than a total of 25 hours of CME can be obtained via this mode. These programs only can be utilized if approved by the Continuing Education Coordinating Board of Emergency Medical Services (CECBEMS) or the Bureau.

**5. Journals**

Only 5 hours of CME can be used by completing tests from various journals or publications, which are related to the EMT scope of practice.

**CME RECORDS**

The Training Officer is responsible to maintain records of all CME obtained by each certified person of the agency. This responsibility includes:

1. Maintaining CME records that provide verification of the following:
  - a. Dates of training;
  - b. Activity, CME topic, name, and certification number (if applicable) of Instructor(s);
  - c. Documentation of students in attendance; and
  - d. Accurate documentation of actual hours students spent in class.
2. Maintaining records of CME received outside of the agency.
  - a. The Training Officer may sign for outside training sessions if documentation of the individual's attendance is on file.
  - b. The Training Officer is responsible to verify authenticity of any training documents from outside of their agency.
3. Providing periodic CME reports to the individual EMT on his/her current recertification status.
4. Maintaining records of CPR certification and ensuring all personnel remain current. The individual providing and certifying CPR training must be a certified CPR Instructor. The agency must also designate criteria for CPR Instructor. If the agency develops its own CPR program, it must be a Bureau approved course.
5. Maintaining records of each individual EMT's practical recertification examination.
6. All records must be maintained for seven years after the recertification period.
7. All CME records must be available for audit by the Bureau at all times.

## **AGENCY-AFFILIATED RECERTIFICATION**

The Training Officer is responsible to assure that recertification materials are completed and submitted to the Bureau.

The Training Officer must assure that the following information is completed for each recertifying EMT/Paramedic and on file with the agency:

1. Recertification Practical Test (EMT-B only).
2. Completion of a CPR course for EMT-Basic and EMT-Intermediate, and for Paramedic an ACLS and CPR course within the past two years.
3. Copy of all CME information (See Appendix D: Recertification Protocol for exact CME Requirements listed by certification level).

The following must be submitted to the Bureau in one complete package:

1. A completed, signed, and notarized application for each EMT/Paramedic recertifying.
2. A letter signed by the Training Officer verifying that each EMT/Paramedic recertifying has completed all the recertification requirements and that copies are on file with the agency.
3. A letter signed by the Medical Director, verifying skills competency for EMT-Intermediate, EMT-IA, or Paramedic.
4. Fees must be submitted with recertification materials. **Fees may be paid by check or purchase order only.** Bureau will invoice only if we receive a purchase order. The Bureau must receive all fees and documents before recertification is completed
5. Results of a TB Test. Must be read by an appropriate medical Provider. . If the result is positive, a statement from a physician attesting that appropriate follow-up is occurring must be submitted..
6. Documentation verifying the individual is currently CPR certified.
7. Verification of additional requirements as needed for advanced levels. (See Appendix D: Recertification Protocol).

## **AGENCY WRITTEN AND PRACTICAL TEST PROCEDURES**

All written tests must be taken at a Bureau recognized state test site. Written test scheduling is done through the Bureau. Tests must be scheduled at least two weeks prior to the desired test date. For additional information, contact the Bureau at 801-538-6435. Individuals may test anytime within the year prior to the recertification date.

Practical tests can be taken from the state by calling the Bureau to register for testing at a test site or they may be taken through an approved agency test site. Reciprocity applicants **must** test with the State Test Team.

The recertification written and practical examinations are designed to determine if an individual has maintained the minimum knowledge and skills required of an EMT. The knowledge and skill requirements are the same as those outlined in the EMT training course.

Any agency/organization who wishes to administer the practical test to their own EMTs or other recertifying EMTs must meet the following criteria before being approved by the Bureau.

1. Be a provider of medical care and/or EMS service to the community.
2. Have and maintain a roster of certified EMS personnel and make such roster available to the EMS Bureau upon request.
3. Have a functioning regularly scheduled CME program.
4. Have a designated Training Officer who will assume total responsibility for the EMT recertification practical testing within an agency.
5. The designated Training Officer must attend a new Training Officer's Course before assuming responsibility for the testing program and must also attend a Training Officer Seminar every year.
6. The practical test must be administered in accordance with Bureau standards and maintain absolute integrity of the test in attesting to the individual EMT's competency in completing the practical examination.
7. Utilize only State certified EMT instructors to evaluate the practical test. The training officer cannot be counted as one of the required evaluators.
8. Conduct the test in a fair and unbiased manner.
9. Maintain records on all EMT practical tests administered in accordance with Bureau standards for seven years past the certification period.
10. Allow Bureau of EMS staff to access, without notice, any and all test sites and/or practical test and training records.
11. Submit annually to the Bureau, Standards and Evaluation Program, a proposed testing plan and schedule of testing for the ensuing year. The Bureau should be notified of any changes in the schedule, and notified prior to any testing.
12. Use the appropriate equipment for testing as designated in the testing protocol.
13. Conduct the recertification practical test no sooner than twelve months or later than one month prior to any EMT expiration date.
  - a. A maximum of two attempts to pass each test is allowed without additional training. The EMT must request the second test and pay all applicable testing fees. All retests must be completed before the EMTs expiration date or the EMT will be considered lapsed.

- b. EMTs who fail both attempts, at either test, will be required to complete an entire EMT training course to be eligible for further testing.
  - c. If the EMT fails two or more scenarios on their first test, they must test with the state test team for the re-test.
- 14. Provide the Bureau with a signed “Letter of Designation” attesting to the agency’s willingness to comply with the requirements of this manual.
  - 15. Provide the Bureau with a signed “Letter of Commitment” attesting to the training officer’s willingness to comply with the requirements of this manual.
  - 16. Adhere to all policies and procedures in the “Practical Recertification Examination” manual.
  - 17. The training officer may not validate his/her own recertification. It must be validated by another Bureau recognized training officer.



## **CERTIFICATION/RECERTIFICATION REQUIREMENTS**

### **EMT-B RECERTIFICATION**

The requirements for recertification are in accordance with the State of Utah Administrative Rules: Evaluation and Training Standards

1. Recertification is required every four years. This period may be modified by the Bureau to standardize EMT recertification cycles for agencies. There will be absolutely no extensions of the recertification time frames!
2. To recertify as an Emergency Medical Technician (EMT)-Basic, an EMT shall:
  - a. Submit a completed, signed, and notarized recertification application. Criminal identification background checks will be made on all applications.
  - b. Submit verification of 100 hours of CME as identified in the required areas. This must be completed in a four-year period. (See Appendix D: Recertification Protocol for exact CME Requirements listed by certification level).
  - c. Submit verification of a current course completion in cardiopulmonary resuscitation (CPR).
  - d. Successfully complete all applicable Bureau written and practical examinations (practical may be taken either with approved test agency or the Bureau).
  - e. Submit appropriate fees.
  - f. Submit results of a TB Test. The results must be read by an appropriate medical Provider. If the result is positive, a statement from a physician attesting that appropriate follow-up is occurring must also be submitted.

**NOTE:** Recertification at a more advanced level than EMT-Basic has additional requirements. (See Appendix D: Recertification Protocol).

### **EMT-I RECERTIFICATION**

1. Submit a completed, signed, and notarized recertification application. Criminal identification background checks will be made on all applications.
2. Successfully complete all of the EMT-B recertification requirements.
3. Submit verification that 16 hours of the 100 hours of CME are topics in EMT-I subjects, such as advanced airway, intubation, medication administration, etc. (See Appendix D: Recertification Protocol for CME hour requirement listed by certification level.)
4. Submit a letter to the Bureau from the Physician Advisor recommending the individual for recertification and verifying that the individual has demonstrated proficiency in the following EMT-I skills:

- (1) Initiating and terminating intravenous infusion, including pediatric vascular access.
  - (2) Insertion and removal of intraosseous needles.
  - (3) Administering medications via intramuscular, subcutaneous, and intravenous routes.
  - (4) Successful completion of advanced airway training.
  - (5) Submit verification of six months of pass offs in advanced airway skills.
  - (6) Completion of pediatric vascular access skills station.
5. Successfully complete the EMT-I recertification written examination.
  6. **PEDIATRIC VASCULAR SKILLS STATION REQUIREMENT**

The completion of a pediatric vascular access skills station is required for all personnel who are EMT-I, EMT-IA, or Paramedic certified once during the certification period. The Pediatric Vascular Access skills station is a three-hour module consisting of a lecture of recognition and management of pediatric shock, skills station of peripheral access, which includes arm, scalp veins, and intraosseous needle placement.

## **PARAMEDIC RECERTIFICATION**

1. Submit a completed, signed, and notarized recertification application. Criminal identification background checks will be made on all applications.
2. Provide documentation of completion of 100 hours of Department-approved continuing medical education distributed throughout the prior four years. (See Appendix D: Recertification Protocol for exact CME Requirements listed by certification level).
3. Successfully complete the applicable recertification examinations, or reexaminations if necessary, within one year prior to expiration of the certification to be renewed;
4. Submit a statement from the applicant's EMS provider organization or a physician, confirming the applicant's results of a TB examination;
5. Complete the specific recertification requirements for the certification level;
6. Maintain and submit verification of current department-approved course completion in Adult and Pediatric Advanced Cardiac Life Support; and
7. Submit an evaluation of clinical competency and a recommendation for recertification from an off-line medical director.
8. **PEDIATRIC VASCULAR SKILLS STATION REQUIREMENT**

The completion of a pediatric vascular access skills station is required for all personnel who are EMT-I, EMT-IA, or Paramedic certified once during the certification period. The Pediatric Vascular Access skills station is a three-hour module consisting of a lecture of recognition and management of pediatric shock, skills station of peripheral access, which includes arm, scalp veins, and intraosseous needle placement.

## **EMS INSTRUCTOR CERTIFICATION REQUIREMENTS**

1. Be a certified Utah EMT for at least one year.
2. Submit documentation of 30 hours of patient care.
3. Submit documentation of current CPR Instructor certification from a Bureau approved source.
4. Submit three letters of recommendation from health care providers, regarding EMS skills and teaching abilities.
5. Submit documentation of 15 hours teaching experience.
6. Successfully complete a Bureau sponsored EMS Instructor Course.

## **EMS INSTRUCTOR RECERTIFICATION REQUIREMENTS**

The requirements for EMS Instructor recertification are as follows:

1. Maintain Utah EMT certification.
2. Submit verification of attendance at a Bureau sponsored Instructor Seminar at least once every two years.
3. Submit verification of 30 hours teaching experience within a certification period.
4. Submit verification of current CPR Instructor certification.

All verification materials must be submitted with recertification documents.

## **COURSE COORDINATOR CERTIFICATION REQUIREMENTS**

The EMT course is a complex program, which requires a great deal of coordination and record keeping. Therefore, anyone serving as a Course Coordinator will be required to meet all of the following requirements:

1. Be an EMT Instructor for at least one year.
2. Be an Instructor of record (either primary or assistant) for at least one EMT-B course, and:
  - a. Teach a minimum of 15 hours.
  - b. Provide a written evaluation from the Course Coordinator.
3. Co-coordinate at least one EMT course with an approved Course Coordinator.
4. Review the course training standards and criteria with a designated representative of the Bureau Standards and Evaluations staff and complete the Bureau training for new Course Coordinators.

5. Receive approval from the Bureau Standards and Evaluations staff.
6. Agree to adhere to Bureau policies and training standards.
7. The first course coordinated will be a probationary course and will be evaluated for:
  - a. Compliance with Bureau Standards
  - b. Student performance.
8. Sign and submit to the Bureau a Training Standards Agreement annually.

#### **COURSE COORDINATOR RECERTIFICATION REQUIREMENTS**

1. Successfully complete requirements for EMT Instructor recertification.
2. Coordinate a minimum of one course every two years.
3. Satisfactory attendance at one Course Coordinator seminar every year.
4. Receive recertification recommendation from the Bureau Standards and Evaluations staff.

#### **TRAINING OFFICER CERTIFICATION REQUIREMENTS**

1. Current EMT/EMD instructor.
2. Successfully complete the New Training Officer Course.
3. Submit a letter of designation from the agency represented.
4. Submit a letter of commitment to the department agreeing to abide by the policies and procedures in the Training Officer Manual.

#### **TRAINING OFFICER RECERTIFICATION REQUIREMENTS**

1. Satisfactory attendance at a Training Officer Seminar once every year;
2. Be a current EMT/EMD instructor;
3. Submit a Letter of Commitment to the department agreeing to abide by the policies and procedures in the Training Officer Manual.

## **ADJUSTING EMT RECERTIFICATION DATES TO COINCIDE WITH THEIR AGENCY**

The Bureau will not extend certifications under any circumstances, however, the Bureau will allow for adjustments to individual certifications to facilitate the certification process of an agency. Therefore, the Bureau will adjust the individual's EMT certification when they meet the following criteria:

1. The EMT has moved to a new geographical location or has changed to a different provider service, within their certification period. Changes will not be made for individuals who have multiple provider agencies when their certification date is applicable to one of those agencies.
2. The EMT and/or the Provider agency must request the adjustment, in writing, prior to the EMTs assigned recertification date.
3. The EMTs total certification period cannot exceed four years. CME hours will be adjusted accordingly. No extensions will be given.

All recertification changes must be completed before the EMT's expiration date.

## **LAPSED CERTIFICATION**

An EMT will be considered lapsed if one of the following conditions exists:

1. An EMT has not turned in all recertification requirements to the Bureau by their expiration date.
2. An EMT does not maintain the current CPR course completion requirement.

If an EMT has extenuating circumstances which prevented him/her from completing the requirements prior to the expiration date, a written request to waive the lapsed fee must be submitted to the Bureau prior to his/her expiration date, if possible.

Any EMT who has completed all recertification requirements but who has failed one of the tests prior to the expiration date and who does not have adequate opportunity to retest prior to his/her expiration date, will not be considered lapsed.

A lapsed EMT recertification will be assigned as follows:

1. If the EMT completed most of the requirements before he/she lapsed and has been lapsed for six months or less, the new expiration date will be four years from his /her last expiration date.
2. If the EMT has lapsed for more than six months and less than one year, the new expiration date will be four years from the quarter that all recertification requirements are met.
3. If the EMT is with an agency, the Training Officer may be contacted to see what recertification date the EMT should have. However, this period can never be longer than four years.

If certification has lapsed for longer than one year, the individual must complete another EMT course to become eligible to certify. Contact the Bureau in the case of extenuating circumstances.

Instructors or Course Coordinators who allow their Instructor or Course Coordinator certification to lapse will be considered on an individual basis.

## **EMT RECIPROCITY REQUIREMENTS**

1. EMTs currently certified by another state EMS Agency or National Registry may request reciprocity by meeting the following:
  - a. Complete and submit an application. The application requires two signatures, one on the front and one on the back, and must be notarized.
  - b. Submit a photo for an identification badge, not larger than 1 ¼" X 1 ½".
  - c. Submit a copy of a current state certificate, identification badge, or National Registry record. The Bureau will verify certification. If recognized through National Registry, the applicant must also submit name and address of the training institution and contact person.
  - d. Submit a copy of current CPR certification or completion of a Bureau-approved course within the past two years.
  - e. Verification of 25 hours of continuing medical education within the past year. (Course completion certificate or letter of verification required.)
  - f. Successfully complete written certification examination.
  - g. Successfully complete the recertification practical examination administered by the State Test Team.
  - h. Submit payment of the required fees.
  - i. Submit to a background and fingerprint check.
  - j. Attendance at a Bureau reciprocity orientation meeting.

**All documentation and test fees must be submitted in one complete packet. Incomplete packets will be returned to sender, and no tests will be scheduled until a complete packet is received. Fees are not refundable, and fingerprints will be submitted to the Bureau of Criminal Identification for a complete background check. The certification period will be for four years.**

## **UTAH PARAMEDIC RECIPROCITY INFORMATION**

The Utah State Department of Health, Bureau of Emergency Medical Services, will accept application for reciprocal paramedic status from persons who:

1. Completed the current DOT Paramedic National Standard Curriculum. A copy of current state certificate, and name and address of training institution must be submitted.
2. Submit completed application along with a picture, not larger than 1 ¼" X 1 ½". This application requires two signatures, one on the front and one on the back, and must be notarized.
3. Submit to a background and fingerprint check.
4. Successfully complete the Bureau written and practical examination.
5. Submit current Bureau approved advanced cardiac life support (ACLS) course completion.

6. Submit current PALS or PEPP course completion.
7. Submit documentation of 25 hours of CME within the past year.
8. Submit payment of the required fees:

**All documents and fees must be submitted in one complete packet. Incomplete packets will be returned to the sender. You will not be allowed to test until the Bureau receives all documentation.**

Applicants will be tested in all or any combination of the following:

- A. Mega code
- B. Trauma Scenario
- C. Pediatric Scenario
- D. Airway management, including:
  1. BLS airway
  2. Endotracheal intubation (pediatric and adult)
  3. Removal of foreign object
  4. Suctioning.
- E. Administration of intravenous solutions and intravenous medication.
- F. Administration of the drugs in adult and pediatric dosages. The list of required drugs are listed in the Minimum Drug, Supplies and Equipment Standards available at the Bureau.
- G. Dysarrhythmia recognition and treatment
- H. Gastric suction by intubation
- I. Needle aspiration of the chest
- J. Phlebotomy or drawing blood specimens for analysis
- K. Splinting and bandaging
- L. Soft tissue injuries
- M. Extrication and movement of injured persons
- N. Bleeding wounds and shock
- O. Emergency childbirth
- P. Medical and environmental emergencies
- Q. Cricothyroidotomy
- R. Intraosseous Infusion

If the student feels they are deficient in any of the above skills or subject areas, they will be required to make arrangements with a training institution or others as approved by the Bureau to alleviate those deficiencies.

This certification will be valid for a period of four years. At the end of that time, the applicant will be required to recertify following the procedures outlined in the Paramedic Recertification Guidelines.